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AUTHOR Asano, Mildred M.
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ABSTRACT

This 1977-1978 annual report of the Social Services Component of Early Childhood Programs within the School District of Philadelphia provides a description of the types and quantities of activities undertaken in five early childhood programs by the social service workers. Data were obtained from periodic reporting forms designed by the Early Childhood Evaluation Unit. The data focused on three areas of services: (1) the number of families requiring services and the number receiving assistance; (2) the frequency of contacts with families; and (3) the types of assistance provided to families. Social services were mandated in four of the five programs discussed in this report: Child Care (CC); Get Set Day Care (GS); Prekindergarten Head Start (HS); and Follow Through (FT). The fifth program, Parent Cooperative Nurseries, (PCN) was included by program request. Each program was able to attain either fully or partially its specific objectives or its performance standards. Within the programs' mandated social services, 88 social service workers made 85,181 contacts, of which 54 percent were with a parent or guardian, 35 percent were with other program personnel, and 11 percent were with community agencies. Social service workers focused primarily on admission and recruitment, children's attendance, and home-school liaison functions. Although insufficient data were obtained regarding the frequency of contacts with families in two programs (GS, FT), 85 percent of the families in the other two programs were contacted one to three times, and 15 percent were contacted four or more times a month or quarter. (Author/MP)

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REPORT OF EARLY CHILDHOOD PROGRAMS SOCIAL SERVICES 1977-1978

Report Prepared By:
Mildred M. Asano
of the
Early Childhood Evaluation Unit

Report Number 7913

December, 1978

Irvin J. Farber
Assistant Director
Priority Operations
Evaluation Services

Thomas C. McNamara
Manager
Early Childhood Evaluation

Michael H. Kean
Executive Director

Office of Research and Evaluation
THE SCHOOL DISTRICT OF PHILADELPHIA

PS 010675

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Early Childhood Education

Mr. Thomas C. Rosica
Executive Director
Federal Programs

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ABSTRACT

The 1977-1978 annual Report of the Social Services Component of Early Childhood Programs within the School District of Philadelphia provides a description of the types and quantities of activities undertaken by the social service workers. In addition, the information is related to each program's social services component functions or performance objectives. Data were obtained from reporting forms designed by the Early Childhood Evaluation Unit and a program's monthly social worker's personal form.

Social services were mandated in four of the five programs discussed in the report: Child Care, Follow Through, Get Set Day Care and Prekindergarten Head Start. The fifth program, Parent Cooperative Nurseries, was included by program request.

Each program was able to attain either fully or partially its specific objectives or its performance standards. There were 88 social service workers within the programs mandating social service. These social service workers made 93,799 contacts with parent or guardian, 32,131 contacts with other program personnel, and 1103 contacts with community agencies. The service workers focused primarily on admission and recruitment, children's attendance, and home-school liaison functions. Contacts with parents in the three pre-school programs with mandated social service component were conducted through the use of the telephone or by holding a conference at the center, while contacts with parents in the single schoolage program were made through home visits. Although insufficient data were obtained regarding the frequenty of contacts with families in two programs, 85% of the families

in the other two programs were contacted one to three times, and 15% were contacted four or more times during a month or quarter.

The Parent Cooperative Nursery Program, which does not require social services, had 51,812 social service-related contacts with families. The classroom teachers usually held social service-related conferences at the center and undertook home-school liaison functions.

The Office of Early Childhood Education of the School District of Philadelphia offers eleven Early Childhood Programs (ECP). The Early Childhood Evaluation Unit (ECEU) serves these programs by undertaking evaluations to meet three purposes:

1. To provide uniform comprehensive information about the type and quantities of activities for all Early Childhood Programs.

2. To provide program personnel with objective data with which to assess current efforts and to improve the service delivery system.

3. To provide documentation of program services necessary for the assessment of objectives established by external funding sources.

This report focuses primarily on the social services component across four ECP which mandate these services as an integral part of their overall program for children. These four programs are: Child Care (CC), Get Set Day Care (GS), Prekindergarten Head Start (HS) and Follow Through (FT). A fifth program, Parent Cooperative Nursery (PCN) does not require social services in its overall program; however, program administrators requested that data be collected to ascertain the need for these services, and this information is included in the report. This annual report, therefore, will describe services provided from September, 1977 to June, 1978 to the approximately 8600 families (and 10,300 children) in these five programs.

The body of this report will present information across all programs, while each program's comprehensive social service report will be presented in the Appendix. The Appendix has six subsections of which A-1 through A-5 are the year-end component reports for each program listed above. The data collection instruments are presented in A-6.

Generally, two separate forms were used during the year to obtain information. Service workers completed a Social Services Monthly (Quarterly) Report Form. Additional program information on the Component Reporting Form was requested from the Coordinator of Social Services. Data collection focused on three areas of service: 1) the number of families requiring services and the number receiving assistance, 2) the frequency of contacts with families, and 3) the types of assistance provided to families. This summary of the social service workers' activities will be presented in three parts: I. Social Service Contexts for the five Early Childhood Programs; II. Program Goals and Objectives: III. An Overview of Service Provisions to Families; and IV. Summary and Conclusions.

I. Social Service Contexts for Early Childhood Programs (ECP)

Table I provides descriptive information about each ECP. Of the three pre-school programs requiring social services, Get Set Day Care had the largest number of program participants and the largest number of social service workers with the least number of families assigned to each worker. This was followed by the Child Care and Head Start programs. Follow Through, a schoolage program, had fewer service workers than Child Care, but the largest number of families assigned to each worker.

There was an income eligibility criterion for families in CC, HS, and GS. There was an additional requirement placed on the head of the household (in GS and CC) to be employed or in training to participate. Parent Cooperative Nursery had neither condition. Eligibility in FT was based on Title I eligibility, i.e., on the child's CAT score the previous year, as well as attendance at a Title I eligible school. Families participating in HS and

PCN registered only once, and continued participation was based on eligibility factors. Continued participation in FT was dependent upon the child's CAT scores. In summary, these ECP differed on eligibility for services, age grouping of children, size of program personnel and participants, number of service workers and per worker responsibilities, and whether or not specific performance objectives were required.

II. Program Goals and Objectives

In describing the Social Service Contexts for the programs in the previous section, it was stated that they differ with respect to requirements for specific performance objectives. This section addresses these differences within a general discussion of each program's goals and/or objectives for this component.

As stated in the introduction, PCN does not have a social services component and was only interested in investigating the feasibility of introducing one in 1977-1978. However, the other four programs (CC, FT, GS, and HS) are required to provide these kinds of services and are governed by at least broad goal statements in this regard.

Child Care goals reflect this program's purpose of providing "a Day Care service for children whose parents have to be out of the home a major part of the day because of work, education or training, or major illness." In fulfilling the program's purpose, it is the responsibility of the caseworkers to (a) conduct intake in a manner that stresses the "shared responsibility of center and family," (b) identify unmet needs of the child or family, (c) monitor children's progress in growth and development, and (d) "enlist other center or outside sources as needed" to assure the child's/family's well being. During 1977-1978 the 12 Child Care caseworkers: (a) conducted an average of

TABLE I

CHARACTERISTICS OF PROGRAMS
WITH SOCIAL SERVICES COMPONENTS
1977-1978

Characteristics of Programs	EARLY CHILDHOOD PROGRAMS				
	Child Care	Get Set	Head Start	Parent Co-operative Nursery[1]	Follow Through
1) Age Range of Part.	Infant-Schoolage	3 yrs-School-	3-5 yr.olds	3-5 yr. olds	Kinder.-Gd.
2) No. of program sites	17	76	18	24	14
3) Inquires for Services	1680	ND	2776	600	NA
4) Total Part.(9/77-6/78)					
Families	1325	ND	1020	494	ND
Children	1700	ND	1044	517	ND
5) Avg. Mo. Enrollment					
Families	957	3500*	860	400	2190
Children	1232	4265*	876	405	2726
6) Admitted-Families	371	ND	1020	494	NA
7) Withdrawn-Families	498	ND	156	150	NA
8) Turnover Rate					
Monthly	3.9	ND	1.8	3.8	ND
Yearly	38.8	ND	18.9	37.5	20.1*
9) Families on Waiting List 6/78	695	ND	427	513	NA
10) Family Composition					
1 Parent Household	72%	ND	40%	5%	ND
2 Parent Household	28%	ND	60%	95%	ND
11) Use of Program Ser.					
Regular Services	100%	94%	88%	100%	100%
Special Needs	0%	6%	12%	0%	0%
12) Social Ser. Wk. Title	Caseworker	Social Worker	School Comm. Coordinator	Teacher	Parent Invo Coordinator
13) No. of Ser. Workers	12	62	3	0	11
14) Avg. No. of Families Per Service Worker	80	56*	153	18[2]	161
15) Specific Performance Objectives Required	NA	YES	NA	NA	YES
16) Special Circumstances	Admission freeze was imposed by the funding source 10/77 - 5/78		Coordinator out on Mat. Leave 5 mos.	Special Study to Ascertain Need for (SSW) Social Service Worker	a)No staff Thru mid-November b)One PIC o on illnes w/stroke 4/78

[1]PCN does not have a social services component. Information is included for this year only as a result of a special study to ascertain need for a social services worker in the program.

[2]Average number is based on number of teachers in the program.

*Asterisk indicates an estimate of participants.

ND=No data available.

NA=Item not applicable to specific program.

3.3 contacts with 346 families who were being recruited and/or were newly applying for admission, and 5.6 actual admission contacts with the 371 families participating in the program, (b) identified an average of 340 new families each quarter as being in need of social services (Approximately 2/3 of these received services during the quarter; each caseworker contacted approximately 60 families each quarter.), (c) conducted periodic child observations and evaluation conferences with the teachers and in addition made a total of 1892 contacts with parents, the vast majority of which were concerned with the child's attendance including adjustment to the center and physical health, and (d) enlisted other center or community resources. In this last respect, 17% of the contacts were held with community agencies principally for referral purposes, advocacy, and exchanging information, while 26% were held with program staff regarding the child's attendance, his physical and mental health, and family dysfunctioning. These data seem to indicate clearly that Child Care goals for this component were well attained overall.

The original Follow Through Program has a mandated social services component whose general purpose is to "link the Follow Through project, the family, and related community resources and services"; the component's services must help "low-income families deal with or prevent problems which limit the realization of their full potential." Since FT is in large part Title I funded, in addition to basic Community Services Act (CSA) funding, it is required to submit specific performance objectives related to its general goals.

During 1977-1978, social services in the 14 original FT schools were provided by 11 Parent Involvement Coordinators (PICs). Due to a delay in funding these positions, the PICs were unable to begin providing services until mid-November. The mandated Title I objectives required (a) that at least 85% of

the families be visited and (b) that at least 50% of the families identified as being in need receive on-going social service help during the year. The first objective was not attained; only 28.5% of the families were reported as receiving visits. Due to a miscommunication regarding recording forms, only 4 of the 11 PICs turned in information on this objective. Therefore, attainment had to be ruled out on this consideration alone. The second objective was more than attained; 766 families were identified as requiring social services during the year, and 544 (72%) were provided the needed assistance. The original FT program this past year showed partial attainment of the mandated specific performar objectives for this component.

Get Set Day Care is funded under Title XX of the Ammended Social Security Act of 1975 and, a child day care program under this act is subject to three broad goals: (a) helping families to achieve or maintain self-sufficency, including reduction or prevention of dependency, (b) preventing or remedying neglect, abuse or exploitation of children and adults unable to protect their own interests, or preserving, rehabilitating, or reuniting families, and (c) preventing or reducing inappropriate institutional care by providing for community-based care, home-based care, or other forms of less intensive care. In its efforts to comply with these goals, GS provides special educational and health services in addition to specific social services.

During 1977-1978, 62 social workers served more than 4000 children and their families in 76 GS centers. More detailed information for this component could not be obtained, but data were received pertaining to intake activities and on-going services as well as for five internal operating objectives the program set for itself during the year. Regarding intake, each worker conducted 98 intake contacts (a total of 6109 contacts occurred in the area)

during the year, primarily with parents, with firm indications of outside agency contacts. With respect to on-going services, though more than 50,000 contacts were indicated in the information received, the vast majority of these (87%) were of an unspecified nature; slightly more than 10% were devoted to the intake process already mentioned, the remaining 3% were identified as being directed toward child attendance problems, health problems, family dsy-functioning, and sharing program information. The five internal operating objectives for the year had to do with (a) developing an outreach plan, (b) establishing a special program to encourage enrollment of schoolage children, (c) conducting six workshops related to case-recording techniques, (d) conducting six workshops on interviewing techniques, and (e) developing a loose-leaf binder system for referred resources. The two objectives of conducting six workshops related to case recording techniques and conducting six workshops on interviewing techniques were accomplished. The enrollment of schoolage children, outreach plan, and the loose-leaf referral resource system were not developed. Get Set Day Care, then, appears in general to have engaged in all forms of expected social services but with specific information lacking. It also attained two of the five internal operating objectives it set for itself.

The Prekindergarten Head Start Program has five broad objectives (goals): (a) to establish and maintain an outreach and recruitment process which systematically insures enrollment of eligible children, (b) to provide enrollment of eligible children regardless of race, sex, creed, co[illegible] national origin, or handicapping condition (to meet a mandate requiring that at least 10% of the enrollment opportunities be provided to handicapped children), (c) to achieve parent participation in the center and home program and related activities, (d) to assist the family in its own efforts to improve the conditions and quality of family life, and (e) to make parents aware of community

services and resources and facilitate their use. Each of those goals except (c), which relates directly to the parent involvement component and is covered in a separte report, is within the province of the social services component.

During the 1977-1978 program year, three (3) social service workers handled 3376 requests for service. Regarding outreach and recruitment, the program's minimum enrollment was 847 children; the average enrollment from January to June, 1978 was 876 children. There were 427 families on the waiting list in June, 1978 and these families were recruited for the 1978-79 program year. There were provisions to prevent discrimination in enrollment in general. Of the total enrollment 11.7% were handicapped, thus more than meeting the special mandate in this regard. Regarding assistance to families in improving life conditions, 797 (78%) of the families were identified as being in need of social services, and 572 (71.8%) of these families received assistance during the year; an average of 167 families were contacted by each social service worker during each quarter. With respect to making parents aware of community resources and facilitating their use, approximately 476 (8%) contacts were related to referrals and serving in a liaison or advocate role with community agencies; 5% of the contacts were for the purpose of informing families about community resources. Overall, Prekindergarten Head Start has carried out its mission in the social services area.

In the following section, a more detailed picture of amounts and types of services provided to families in each program will be presented.

III. An Overview of Service Provisions to Families

A. Families Identified as Being in Need of Services and Number Provided Services

Social service workers were requested to identify the number of families requiring assistance and, of these families, the number assisted. Table II shows the percentage of families in each program requiring services, the number receiving services, and the average number of families being served quarterly i.e., September - December (Q_1), January - March (Q_2), and April - June (Q_3). Of the four programs that submitted data, 78% of the families in HS and CC required services (excluding program participation). Thirty-four percent of the families in FT and 22% of the families in PCN required services. Data were unavailable from GS. Also, between 61-72% of the families in CC, HS and FT programs requiring social services received services, while 83% of the families in PCN received services.

B. Purpose of Service Contact With the Families

Table III presents seven principal categories of service provision to families. An eighth category, unspecified, was added for contacts undertaken by the social service workers in which the purpose of the contact was not identified by the service worker. Overall, there were 136,963 contacts undertaken by the social service workers to assist families (excluding PCN, 85,151 contacts). Forty percent were unspecified, 28% were conducted for home-school liaison or program information, 12% for admission/recruitment, 7% for child's physical health, 6% for child's attendance, and the remaining 7% for child's mental health, family dysfunctioning, and information about community resources. Excluding PCN's data, unspecified contacts increased to

TABLE II

FAMILIES IDENTIFIED AS BEING IN NEED OF SERVICES
AND NUMBER PROVIDED SOCIAL SERVICES
1977-1978

Early Childhood Programs	Total No. of Families	FAMILIES IDENTIFIED IN NEED OF SERVICES									
		Proportion of Total Program Participants		Proportion of Families Identified Who Were Assisted		Average Number of Families Assisted Quarterly					
						Assisted		Unassisted		Total	
		N	%	N	%	N	%	N	%	N	%
Child Care	1300	1016	78.2	617	60.7	206	60.8	133	39.2	339	100.0
Get Set	3500[1]	*	*	*	*	*	*	*	*	*	*
Head Start	1020	797	78.1	572	71.8	191	71.8	75	28.2	266	100.0
Follow Through	2260[1]	766	33.9	554	72.3	185	72.5	70	27.5	255	100.0
Parent Cooperative Nursery	494	107	21.7	90	84.1	30	83.3	6	16.7	36	100.0

[1]Estimated number of families.

*An asterick indicates data were unavailable.

TABLE III

PURPOSE OF SOCIAL SERVICE WORKER CONTACT WITH FAMILIES
COMMUNITY AGENCIES AND PROGRAM PERSONNEL

Early Childhood Programs	PURPOSE OF CONTACTS																	
	Child's Attendance		Child's Physical Hth.		Child's Mental Hth.		Family Dsyfunctioning		Home-School Information		Information About Com. Ag.		Admission/ Recruitment		Unspecified		Total	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Child Care	1681	14.2	1501	12.6	748	6.3	1785	15.0	1623	13.7	1200	10.1	3342	28.1	0	0.0	11880	100.0
Get Set	343	.6	561	1.0	182	.3	280	.5	176	.3	22	.0	5773	9.8	51582	87.5	58919	100.0
Head Start	2445	40.5	275	4.6	0	.0	570	9.4	733	12.1	236	3.9	1778	29.5	0	0.0	6037	100.0
Follow Through	1410	17.0	1074	12.9	216	2.6	442	5.3	1685	20.3	*	*	0	0.0	3488	41.9	8315	100.0
Parent Cooperative Nursery	1728	3.3	6625	12.8	492	.9	1878	3.6	33706	65.1	1901	3.7	5482	10.6	0	0.0	51812	100.0
Total	7607	5.5	10036	7.3	1638	1.2	4955	3.6	37923	27.7	3359	2.5	16375	12.0	55070	40.2	136963	100.0
Total Excluding PCN	5879	6.9	3411	4.0	1146	1.3	3077	3.6	4217	5.0	1458	1.7	10893	12.8	55070	64.7	85151	100.0

*Combined with Home-School Information.

64% while home-school information decreased to 5%. The percentage of contacts for the other categories remained stable.

Each program appeared to provide major assistance in different areas of service need.

C. Methods of Assisting Families

Methods of assisting families are presented in Table IV, and data are grouped into three categories. Of the total number of contacts undertaken, 68.5% were with the parent or guardian, 8% with community agencies, and 23.5% with program personnel. This pattern changes when focusing on the four programs (CC, HS, GS, FT) with mandated social services: contacts made with the parent or guardian decreased to 54%, contacts with community agencies increased slightly to 11%, and conferences held with program personnel increased to 35%. The change in component emphases were due to the large number of unspecified contacts in GS and FT and the large number of home-school liaison contacts in the PCN program.

The methods of parent contacts were similar in GS and CC, i.e., through the use of the telephone and center conferences without conducting home visits. On the other hand, FT conducted home visits, placed less emphasis on the use of the telephone, and made minimal use of center conferences. Head Start used the telephone, conducted home visits and placed less emphasis on center conferences. The method of contacts in CC and GS seemed to indicate cognizance of the fact that the head of household must be employed, in training or attending school. Therefore, home visits were not feasible or possible in GS or CC.

TABLE IV

METHODS OF ASSISTING FAMILIES
IN NEED OF SOCIAL SERVICES

Early Childhood Programs	PARENT CONTACTS						COMMUNITY AGENCIES						Program Personnel		Total Contacts	
	Phone Only		Home Visits		Ct. Conf. Inc. Counseling		Sharing/Echg. Information		Referrals		Child's/Adult's Behalf					
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Child Care	3719	31.3	75	.6	2995	25.2	1082	9.1	409	3.4	593	5.0	3007	25.3	11880	99.9
Get Set	12585	21.3	1015	1.7	16672	28.3	2249	3.8	1814	3.1	2152	3.7	22432	38.1	58919	100.0
Head Start	1532	25.4	1380	22.9	824	13.6	66	1.1	63	1.0	347	5.7	1825	30.2	6037	99.9
Follow Through	1185	14.3	3476	41.8	432	5.2	195	2.3	292	3.5	287	3.5	2448	29.4	8315	100.0
Parent Cooperative Nursery	7895	15.2	410	.8	39604	76.4	813	1.6	312	.6	359	.7	2419	4.7	51812	100.0
Total	26916	19.7	6356	4.6	60527	44.2	4405	3.2	2890	2.1	3738	2.7	32131	23.5	136963	100.0
Total Excluding PCN	19021	22.3	5946	7.0	20923	24.6	3592	4.2	2578	3.0	3379	4.0	29712	34.9	85151	100.0

In relation to contacts with community agencies, workers in CC made greater use of community resources than the other programs. Their contacts were primarily to share or exchange information (liaison) or undertake an advocacy role. Social service workers in GS and FT had no preference in their use of community agencies, while HS used the role of advocacy to obtain services for the families.

Finally, contacts with program staff occurred most frequenctly with social service workers in GS (38%). This was followed by the social service workers in HS (30%), FT (29%), and least often by caseworkers in CC (25%).

Contacts identified as social service in PCN were generally held with parents and undertaken through a center conference and, less frequently, through the use of the telephone. Areas of discussion were primarily for home-school information and, less frequently, child's health and admission/recruitment.

D. Frequency of Contacts with Families

The frequency of contacts with each family was obtained to ascertain whether a few families continuously received more service attention than other families. Frequency of contacts were pre-categorized into less than three contacts, four to six contacts, and more than six contacts per family. Table V shows the frequency of contacts with families.

Data were unavailable from GS and FT. However, data from HS and CC suggest that of all the families contacted, approximately seven out of every eight families had been contacted between one and three times during a quarter. Data from PCN indicate that the reverse pattern existed. However, this is

due to the teachers having daily contacts with the children and sharing program information with the parent at the center during, before, or after the pre-school day.

TABLE V

AVERAGE NUMBER OF FAMILY CONTACTS
IN EACH QUARTER

Early Childhood Programs	FREQUENCY OF CONTACTS WITH FAMILIES							
	1 to 3		4 to 6		More than 6		Total Families	Average Per Worker
	N	%	N	%	N	%	N	N
Child Care	589	82.5	110	15.4	15	2.1	714	60
Head Start	430	85.7	55	10.9	17	3.4	502	167
Get Set	*	*	*	*	*	*	*	*
Parent Nursery[1]	23	5.8	11	2.8	361	91.4	395	19
Follow Through	*	*	*	*	*	*	*	*

[1]Contacts conducted by PCN's classroom teachers.

*An asterisk indicates that data were unavilable.

IV Summary and Conclusions

Social services were mandated in four of the five programs discussed in this report: Child Care, Follow Through, Get Set Day Care, and Prekindergarten Head Start. The fifth, Parent Cooperative Nurseries, was included by program request.

Each program was able either fully or partially to attain its specific objectives or performance standards. Within the programs' mandated social services, the 88 social service workers made 85,181 contacts, of which 54% were with a parent or guardian, 35% with other program personnel, and 11%

with community agencies. The social service workers focused primarily on admission/recruitment, children's attendance, and home-school liaison functions. Contacts with parents in the three pre-school programs with a mandated social services component were conducted through the use of the telephone or by holding a conference at the center, while contacts with parents in the single schoolage program were undertaken through a home visit. Although insufficient data were obtained regarding the frequency of contacts with families in two programs, 85% of the families in the other two programs were contacted one to three times, and 15% were contacted four or more times during a month or quarter.

It was concluded from the data that a full-time social worker was not needed for the Parent Cooperative Nursery Program. This program, which does not require social services, had 51,812 social service-related contacts with the families. These contacts were made by the 21 teachers in the program and held at the center, primarily to share program information with the families.

A major problem in preparing this report was obtaining accurate program data. For example, 64% of the contacts undertaken by the social service workers with a parent or guardian, community agencies, and program personnel were unspecified, that is, the purpose of undertaking a contact was not identified by the social service worker. In addition, social service workers could not fully report their functions on the data collection form. As a result of these shortcomings, ECEU has modified the reporting form for the 1978-79 program year and has increased its coordination contacts to ensure a smoother data collection effort.

Based on the cummulative data, two recommendations are suggested for social services in the Early Childhood Programs. The specific program component recommendations are presented in each of the Appendices.

1. There appears to be a need to increase the utilization of community resources.

   This suggestion is based on two findings. First, approximately 30-40% of the families identified as being in need of services (excluding program participation) were unable to be assisted within the month or quarter when service need was identified. It was not known what happened to these families or whether the families obtained services from other sources. Secondly, there was little emphasis on utilizing community agencies in three of the four programs with mandated social services. Contacts with community agencies through referrals, sharing/exchanging information as well as undertaking the role of advocate were minimal. As a result, it may be advantageous for the social service workers to increase their efforts toward utilizing community resources, thereby more fully assisting families unable to obtain services.

2. The establishment of specific levels of performance in social services across the Early Childhood Programs.

   This suggestion is made in relation to developing the documentation of the quality of services to families. Evaluation of this component has been purely descriptive up to this point. Perhaps evaluation should also be directed toward the effectiveness of social services, at least in some respect. For example, establishing a specific level of performance (e.g., 75% of the families requiring service will receive services) would indicate that a "minimal level of desirable services" will be provided to families participating in Early Childhood Programs. Data submitted by the social service workers could be compared to the specific service level and thus provide a base for maintaining or modifying social service functions in the Early Childhood Programs.

APPENDIX

A-1

SOCIAL SERVICES IN CHILD CARE

The overall purpose of the Board of Education's Child Care Centers is to provide a Day Care service for children whose parents have to be out of the home a major part of the day because of work, education or training, or major illness. The centers seek to provide an enviroment which supports the child's total development and complements parental care so that the child is afforded the optimum opportunity to achieve maximum growth - educationally, socially, and emotionally.

Within this overall purpose, the caseworker's function is to conduct the intake process with the parent in such a way that the shared responsibility of the center and family begins from pre-admission through admission to enrollment. This includes assessing whether the program of the Child Care Center can appropriately meet the needs of the child and parent, and whether the child can be expected to utilize the program to support his own growth and development.

Once the child is enrolled, it is the caseworker's function to coordinate the efforts of center staff and family in the kind of continuing interaction that assures a supportive experience for the child. It is the caseworker's responsibility to monitor each child's progress, to identify unmet needs in child or child's family, and to enlist other center or outside resources as needed to assure that the child's early life experience is as supportive as possible. (Renitz, 1977)

The aforementioned description of the caseworker's role and responsibilities provides the context for social services functions in the Child Care Program. To obtain information related to the caseworker's major responsibilities, 12 caseworkers recorded their activities on a Social Services Component Monthly Report Form. Additional program information was obtained from the Coordinator of Social Services. The summary of the caseworker's activities will be presented in the following sequence: I. Program Milieu, II. Major Caseworker's Functions or Responsibilities: A. Intake process, B. Identifying unmet needs of the child or family, C. Monitoring a child's progress, and D. Utilizing center and community resources, and III. Conclusions.

I. Program Milieu

A demonstrated need for Child Care services was reflected in the number of inquiries, application for services, and families of childred on the waiting list. For the program year September 1977-June 1978, 1680 inquiries for services were recorded and from these inquiries, 346 families applied for services. An admission freeze was imposed on the program and implemented between October 1977 through May 1978. This "freeze" was necessitated by the publication of new Regulations for Child Care Day Care Centers, with adult-child ratios requiring some reduction in numbers of children in certain groups to meet licensing requirements. As a result of this policy, the number of children on the waiting list remained large (e.g., September 1977, 819 children; January 1978, 902 children; and June 1978, 695 children).

A total of 1325 families with approximately 1700 children participated in the program's seventeen centers during the 10 months of recorded services. Of these families, 371 families were admitted while 498 families withdrew from the program due to a change in the family situation: 1) a child had reached maximum age for program participation, 2) the parent had become unemployed, 3) the family had moved from the neighborhood, and 4) the parents' desire for a child to have a summer vacation. Based on the families terminated from the program and families admitted as replacements; there was a 3.9% monthly family turnover. An estimated 957 families with 1232 non-handicapped children were exposed to the program monthly. Approximately 28% of the families were two-parent households while the remaining 72% were one-parent households.

II. Major Caseworker's Functions

The types of contacts undertaken by the 12 caseworkers for the 10 months of reported services are shown on Table I. The column headings identify the types of contacts undertaken by the caseworker's while the row headings indicate the situations in which caseworkers were called upon to assist families or children. Caseworkers made 11,880 contacts of which 57.1% (6789) were with families, 25.3% (3007) were with program staff and 17.5% (2088) were with the community agencies. Overall, the contacts were conducted for the purpose of intake (admission/recruitment 28%), child's physical health including mental health (19%), family dysfunctioning (15%), child's attendance including adjustment to the center (14%), sharing program information with the families (13%), and sharing information about the community resources (10%). Based on Table I, data will be extracted from the appropriate columns and rows to respond to the four major caseworker's functions or responsibilities.

A. Intake Process

The intake process in Child Care was designed so that the initial interview with the parent would be conducted to obtain information about the family for program staff, also to assess the child's needs, family assets, and current level of functioning. Once a determination was made that the program would complement the family's needs, a second interview would be held with the parent to plan the child's visitation schedule and to obtain more detailed information. including documentation of selected information, about the family.

TABLE I

TYPES OF CONTACTS UNDERTAKEN BY CASEWORKERS TO ASSIST FAMILIES IDENTIFIED IN NEED OF SOCIAL SERVICES 1977-1978

Purpose of Contacts	TYPES OF CONTACTS								
	Parent Contacts By Phone Only	Home Visits	Parent Conf. at Ctr. Inc. Counseling Sessions	Contacts With Other Agencies	Person's Referred	Role of Advocacy	Conferences With Staff	Total Contacts Number	Total Contacts %
Child's Attendance Behavior	465	6	304	49	1	72	784	1681	14.2
Child's Physical Health	516	2	259	111	36	125	452	1501	12.6
Child's Mental Health	36	2	224	78	20	53	335	748	6.3
Family Dsyfunctioning	286	3	534	205	40	103	614	1785	15.0
Program Information Home-School Liaison	515	0	457	189	47	105	310	1623	13.7
Information About Community Agencies	400	12	237	259	109	89	94	1200	10.1
Admissions	888	34	581	147	101	29	362	2142	18.0
Recruitment	613	16	399	44	55	17	56	1200	10.1
Total	3719	75	2995	1082	409	593	3007	11880	100.0
Percentage	31.3	.6	25.2	9.1	3.4	5.0	25.3	-	100.0

A-4.4

Table II shows the number of contacts conducted by the caseworkers with parents, staff, and community agencies related to the intake process and specifically, the recruitment and admission phases. These contacts constituted 28.2% of the total number of contacts made by the caseworkers.

TABLE II

Contacts Undertaken by Caseworkers in Relation to the Intake Process

Purpose of Contacts	Number of Families	Contacts Undertaken by Caseworkers							
		Parents		Comm. Agen.		Prog. Staff		Total	
		N	%	N	%	N	%	N	%
Recruitment	346	1028	85.7	116	9.7	56	4.7	1200	35.9
Admission	371	1503	70.2	277	12.9	362	16.9	2142	64.1
Total		2531	75.7	393	11.8	418	12.5	3342	100.0

Approximately one-third of the contacts were conducted during the recruitment phase,* the remaining two-thirds during the admission phase with parents, staff or community resources. Caseworkers conducted an average of 3.3 contacts with the 346 families who inquired for services. For the 371 families admitted and who participated in the program, caseworkers conducted 5.6 contacts with each family, thus suggesting that a comprehensive admission procedure was rendered by the caseworkers. Overall, three of every four contacts were with parents and one of every four with community agencies and program staff.

* In Child Care, recruitment was normally not necessary. Word-of-mouth, publicity, and waiting lists, usually resulted in full enrollment. The recruitment phase was defined to include contacts with or for families who were not enrolled in the program. Recruitment activities also included contacts undertaken and related to the registration, screening for suitability and giving program information.

B. Child's Progress in the Program

Thirty-five percent of the contacts initiated by the caseworkers were related to the child's progress in the program. Contacts were primarily undertaken to discuss the child's attendance including adjustment to the center and the child's physical health needs.

The total number of contacts initiated by the caseworkers and related to the child's needs is presented on Table III. Three items were specified on the reporting form and a fourth item was written in by a few caseworkers. The item child's attendance was defined to include activities related to chronic absence, tardiness, irregularity of arrival time, and chronic need for early dismissals or early pick-up. The second item, child's physical health, was defined to encompass contacts for illness, injury, extreme sleepiness and other related physical health related problems. The third item, child's mental health, was defined to include only contacts related to a child who had been diagnosed by a medical or mental health professional and the caseworker must assist the child by visiting the home to provide the parents with special materials. Finally, the item child's progress report indicated activities related to conducting observations, assessing the child's overall functioning and adaptation to the center, and sharing information about the child's development in the program.

TABLE III

Number of Contacts by Caseworkers In Relation to a Child's Needs.

Purpose of Contact	Contacts Undertaken by Caseworkers							
	Parents		Comm. Ags.		Prg. Staff		Total	
	N	%	N	%	N	%	N	%
Child's Attendance	775	41.0	122	21.3	784	47.1	1681	40.7
Child's Physical Health	777	41.1	272	47.5	452	27.2	1501	36.4
Child's Mental Health	262	13.8	151	26.3	335	20.1	748	18.1
*Child's Progress Report	78	4.1	28	4.9	93	5.6	199	4.8
Total	1892	100.0	573	100.0	1664	100.0	4129	100.0

* Figures were incorporated under home-school liaison category.

Overall, contacts were held primarily to discuss the child's attendance and physical health needs. There was less emphasis on mental health probably due to the limited definition of mental health services. Within this limitation, contacts with parents (46%) generally focused on child's attendance and physical health needs. In contrast, contacts with community agencies (14%) were primarily held to discuss child's physical health needs and less on child's attendance, while contacts with program staff (40%) were concentrated on child's attendance and less on child's physical health care needs.

C. Identifying Unmet Needs of the Family

In relation to this service function, three service activities will be discussed. First, identifying new and formerly identified families in need of services; secondly, the frequency of contacts with families; and third, the types of assistance requested by families. Besides extracting data from Table I, caseworkers' responses from six separate questions on the reporting form were incorporated.

Columns 1-3 in Table IV show the number of families newly identified as being in need of services and of these families, the number assisted. Columns 4-6 present new and formerly identified families requiring social services, i.e., includes families identified in a prior period whose service needs were unresolved in that period. Finally, columns 7-9 show the number of families whose needs were resolved and unresolved within the quarter. Quarter I (Q_1) spanned from September 1977 to December 1977, Quarter II (Q_2) covered January 1978 to March 1978, and Quarter III (Q_3) encompassed April 1978 to June 1978.

TABLE IV

Families Identified and Provided
Social Services by Quarter

Reporting Period	New Families Requiring Social Services					New & Formerly Identified Families Requiring Servs.					Families Assisted & Service Needs Resolved				
	Served		Unserved		Total	Served		Unserved		Total	Resolved		Unresolved		Total
	N	%	N	%	N	N	%	N	%	N	N	%	N	%	N
Q_1	233	63.5	134	36.5	367	284	67.9	134	32.1	418	233	82.0	51	18.0	284
Q_2	177	45.4	213	54.6	390	228	51.7	213	48.3	441	162	71.1	66	28.9	228
Q_3	207	79.9	52	20.1	259	273	84.0	52	16.0	325	*	*	*	*	273
Q_{AVG}	206	60.8	133	39.2	339	262	66.3	133	33.7	395	*	*	*	*	262

Under columns 1-3, of the 1016 families newly identified as being in need of services, 60.8% (617) families were served. Combining these families with families identified in a prior period who continued to require services, the caseworkers were able to assist 66.3% (262) of the families. Of the families assisted each Quarter, 82% in Q_1 and 71% in Q_2 did not require further services by the end of the quarter. Therefore, it appears that two of every three families identified as being in need of services received services.

Secondly, Table V shows the number of contacts with each family conducted by a caseworker during a quarter. There were three pre-established categories of contacts on the reporting form. The number of families contacted quarterly (Q_{AVG}) and per caseworker has been computed and included in the table. The data show that an average of 714 families were contacted in each quarter with 82% (589 families) contacted three or less times, 15% (100 families) contacted six or less times, and 2% (15 families) contacted more than six times during a quarter. Stated in another way, a caseworker contacted 60 families in each quarter.

TABLE V

Number of Caseworker's Contacts With Families

Reporting Period	Number of Contacts with Families						Total Families	Families Per Caseworker
	1 - 3		4 - 6		More than 6			
	N	%	N	%	N	%	N	N
Q_1	606	86.2	82	11.7	15	2.1	703	59
Q_2	612	83.0	115	15.6	10	1.4	737	61
Q_3	549	78.1	133	18.9	21	3.0	703	59
Q_{AVG}	589	82.5	110	15.4	15	2.1	714	60

Table VI presents seven service areas caseworkers were called upon to address. In addition, it shows three methods of parent contacts undertaken by the caseworkers for both the 76-77 and 77-78 program years. As with the past year, the intake process or recruitment and admission (R/A) continued to be the most prevalent area of service focus. This was followed by five other service areas, each hovering between 9.6% to 14.3%. Contacts for child's mental health care were minimal. (This was probably the result of the limited definition of the term "mental health services.")

In addition, as a result of the admission freeze imposed on the program, two changes occurred in the pattern of service delivery by the caseworkers this year as compared to the prior year. First, there was a dramatic decrease (from 28.5% to 14.4%) in the number of parent conferences held at the center for the purpose of discussing admission/recruitment. Secondly with less need to contact parents for the purpose of admission, the caseworkers' redirected their efforts to other areas of service needs. These areas of increased contacts were for sharing information about community resources, family dysfunctioning and child's physical health care needs. Also, another change in the pattern method of assisting families occurred during the year. Home visits, as a program policy, are not conducted in CC, however, a few were conducted to handle special circumstances this year.

D. Enlisting Other Center or Outside Resources

Information related to this function is extracted from columns 4 - 7 of Table 1. Of the total number of contacts made by the caseworkers, 17.6% were with outside resources and 25.2% were with center or program personnel. Contacts with community agencies were categorized under referral only, sharing

TABLE VI

TYPES OF PARENT CONTACTS UNDERTAKEN BY CASEWORKERS TO ASSIST FAMILIES

Purpose of Contact	TYPES OF PARENT CONTACTS											
	Phone Only			Home Visits[2]			Conferences at Center Including Counseling Services			Total Contacts		
	1977-1978		76-77[1]	1977-1978		76-77	1977-1978		76-77	1977-1978		76-77
	N	%	%	N	%	%	N	%	%	N	%	%
Child's Attendance	465	6.8	6.0	6	.1	0	304	4.5	4.4	775	11.4	10.4
Child's Physical Health	516	7.6	5.0	2	.0	0	259	3.8	2.8	777	11.4	7.8
Child's Mental Health	36	.5	.5	2	.0	0	224	3.3	1.6	262	3.9	2.1
Family Dsyfunctioning	286	4.2	2.5	3	.0	0	534	7.9	6.0	823	12.1	8.5
Program Information Home-School Liaison	515	7.6	8.0	0	.0	0	457	6.7	6.0	972	14.3	14.0
Information About Community Agencies	400	5.9	2.6	12	.2	0	237	3.5	2.7	649	9.6	5.3
Recruitment/ Admission	1501	22.1	23.4	50	.7	0	980	14.4	28.5	2531	37.3	51.9
Total	3719	54.8	48.0	75	1.1	0	2995	44.1	52.0	6789	100.0	100.0

[1] Silbermann, David. Report of Early Childhood Programs Social Services 1976-1977, October, 1977, pg. A-3.

[2] Home visits are not conducted in the Child Care Program. The head of the household is out of the home for part of the day due to training, education or employment.

or exchanging information and caseworker's role of advocacy. Referrals were made primarily to assist families with alternative child care services. The caseworkers contacted community agencies primarily to ensure that they would be able to share information about community resources with the families. The role of advocacy was undertaken most often for handling the child's physical health care needs. Overall, contacts with community agencies to discuss child's attendance including adjustment to the center, and the child's mental health needs were minimal, and 90% of the contacts were held in the remaining categories identified.

Consultations with program staff occurred in one of four areas: Child's attendance including adjustment to the center (26.2%), child's physical and mental health (26.3%), family dysfunctioning (20.8%) and all others (12.8%). Therefore, the types and reasons for contacting center personnel and community agencies were held to discuss different areas of a family's concerns.

III. Summary and Conclusion

Evaluation of social services has remained on the descriptive level and has focused on the quantity of contacts conducted by the caseworkers. This approach has provided information on the basic structure of service delivery. With the exception of the decreased number of intake contacts (probably resulting from the admission freeze imposed on the program this year), the service pattern generally has been consistent for both the 76-77 and 77-78 program years.

In summary, a comprehensive intake process has been provided to families. The caseworkers have been responsible for assessing whether or not the program

complemented the family's needs. There was a low monthly turnover rate of 3.9%. More than two contacts were made during the intake process which indicates that a comprehensive admission procedure has been provided by these caseworkers.

Secondly, caseworkers identified the unmet needs of 1016 families of which, 60.8% received services within the quarter in which service needs were identified. Each caseworker contacted 60 families each quarter. In addition to the intake activities, the caseworkers assisted families in the areas of child's attendance behavior including adjustment to the center, child's physical health needs, and other areas of family needs (family dysfunctioning). The caseworkers have also ensured that program activities were shared with the families.

Third, caseworkers have monitored the child's progress. Based on the average monthly enrollment figures, caseworkers conducted 3.3 contacts for each child enrolled. And finally, caseworkers enlisted the aid of other center personnel and community resources. Of the 11,880 contacts made by the caseworkers, 17% were with community agencies, 26% with program staff and the remaining 57% with families. This suggests that the caseworkers integrated services among the family, program and community agencies.

Perhaps the only area of concern in Child Care is to ensure that social services are provided to families identified in need of services each quarter. Also, since an essential aspect of the caseworker's responsibilities was to conduct a child's evaluation or progress report during a child's participation in the program, a dimension for which the data collection form was inadequate, the reporting form has been modified for the 78-79 program year.

SOCIAL SERVICES IN GET SET DAY CARE

Get Set Day Care (GS) was funded by Title XX under the Ammended Social Security Act of 1975. It was designed to provide child care services to low-income families for three basic purposes: 1) to enable parents or other caretakers of children to work, receive employment related training or education, or to receive social or health services; 2) to provide children, including those developmentally handicapped, with individualized care which would contribute toward the child's development and self-sufficiency; and 3) to prevent or remedy neglect, abuse or exploitation of children and adults unable to protect their own interests, or to preserve, rehabilitate, or reunite families.[1]

Get Set Day Care provided five major services (Education, Health, Nutrition, Psychological and Social Services). This report focuses on social services which were available to families who requested or were identified as being in need of assistance from the Get Set Day Care social service workers (SSW) in 1977-1978. The social service component attempted to meet the needs of families requesting assistance through the integration of day care services with both private and public educational, health and social welfare agencies. Services included intake, explanation and interpretation of policies, and referral and counseling services. Collectively, the SSWs assured a degree of coordination and continuity in services to families.

To obtain information on social services, ECEU developed a cross-program (i.e., to be utilized in four Early Childhood Programs) Social Services Reporting Form. In 1977-78, however, GS was unable to provide its data on this form because to do so would have required a duplication of reporting

[1] Pennsylvania Bulletin, Vol. 6, No. 26, pgs. 1365, 1392.

efforts by the SSW. Data pertaining to social services, therefore, were obtained from the forms previously utilized by the SSW. The data obtained for this report spanned from October, 1977 to June, 1978 and was based on 95% of the GS's Personal Monthly Report Form.

Get Set Day Care employed 62 social service workers to assist directly approximately 3500 families with 4265 children enrolled monthly in 76 day care centers.[1] Social Services and the SSWs' activities will be presented as follows: I. Specific Intake Activities and Services to Children and Families Enrolled, II. Meetings With a Direct Involvement of Social Service Workers, III. Attainment of Internal Operating of Objectives, IV. Social Service Workers' Participation in Parent Involvement and Volunteer Service Activities, and V. Summary and Conclusion.

I. Specific Intake Activities/Services to Children and Families

The SSWs made a total of 58,919 contacts with families, program personnel and community agencies during the program year. Of that total, 10.4% (6109) were related to the programs' intake process of admission and recruitment. Ninety-two percent (5596) of the intake-related contacts were held with parents or guardians. The remaining 8% (513) were held with representatives of community agencies. The number of contacts held with program personnel and related to the intake process were unavailable due to the different recording procedure required on the Get Set and ECEU's form.

Seven pre-identified areas of assistance were specified [2] to ascertain

[1] The number of children was based on the average monthly enrollment figures for January-March 1978. The estimated number of families was derived from taking a percentage (82.5%) of the total number of children enrolled.

[2] The 7 pre-identified needs as shown on Table I, were listed on ECEU's cross-program form. As GS data were not reported on ECEU's form, in order to make the required cross-program Early Childhood Report, GS's data were transposed to ECEU's form.

the types of services provided by the SSWs to children and families. Table I shows the purpose of the interactions between the SSWs and families, program personnel or community agencies. The data indicated that 2.7% of the SSWs' contacts were held for the purposes identified under categories 1-6, 10.3% in category 7, and 87% in category 8 or unspecified. Because so many contacts were classified as unspecified, the purposes of the SSWs' interactions could not be determined. However, the SSW's methods of interaction were available.

Table II shows the SSWs' methods of contacts with the families, program personnel and community agencies for both 1976-77 and 1977-78 program years. (Data for 1976-77 has been presented for comparative purposes.) Although the 1976-77 data were based on a ten month reporting period, there were more contacts undertaken during the nine months of reporting services for the 1977-78 program year. The proportion of contacts with families, community agencies and program staff were similar in both years; therefore, the data suggest that the SSWs' methods of assisting families may be fairly consistent from year to year.

II. Meeting With a Direct Involvement of Social Service Workers

Table III shows the number and types of meetings attended by SSWs. On the average, each SSW attended 31 meetings during the program year. Approximately one-half of the meetings were held with program personnel, one-fourth with parent-related meetings and the remaining one-fourth for staff development and other activities. The data suggest that SSW attended meetings primarily to discuss program operations or to participate in parent-related activities.

TABLE I

PURPOSE OF CONTACTS BY
SOCIAL SERVICE WORKERS TO ASSIST FAMILIES

NUMBER	Purpose of Contacts	SERVICE WORKER'S CONTACTS WITH FAMILIES OR AGENCIES							
		Families Parent, Guardian or Child		Community Agencies Sharing-Exchanging Information Including Referrals		Conferences With Program Personnel Including Referrals		Total	
		N	%	N	%	N	%	N	%
1	Child's Attendance	343	1.1	0	0.0	0	0.0	343	.6
2	Child's Physical Health	42	.1	8	.2	511	2.2	561	1.0
3	Child's Mental Health	0	.0	13	.4	169	.7	182	.3
4	Family Dsyfunctioning	19	.1	261	7.7	0	0.0	280	.5
5	Program Information Home School Liaison	165	.5	11	.3	0	0.0	176	.3
6	Information About Community Agencies	0	.0	22	.7	0	0.0	22	.0
7	Intake Activity Admission/Recruitment	5596	17.2	513	15.2	0	0.0	6109	10.3
8	Unspecified	26,259	81.0	2555	75.5	22,432	97.1	51246	87.0
	Total	32,424 (55.0)	100.0	3383 (5.7)	100.0	23,112 (39.2)	100.0	58919	100.0

TABLE II

METHODS OF CONTACTS BY SOCIAL SERVICE WORKERS TO ASSIST FAMILIES

Types of Contacts	PROGRAM YEAR*			
	1976 - 1977		1977 - 1978	
Family:				
Phone Contacts	12431	23.8	12585	21.4
Home Visits	1180	2.3	1015	1.7
Parent Conferences	16176	31.0	16672	28.3
Child's Observations	1379	2.6	2152	3.7
Community Agencies:				
Contacts Other Than Referrals	1592	3.0	2249	3.8
Referrals	344	.7	1134	1.9
Program Personnel:				
Conferences of Staff	18609	35.6	22432	38.1
Referrals Within Program	507	1.0	680	1.1
Total	52218	100.0	58919	100.0

* Data for 1976-1977 reflects 10 months' of services and 1977-1978 reflects 9 months' of services.

TABLE III

MEETINGS DIRECTLY INVOLVING GET SET SOCIAL SERVICE WORKERS

TYPES OF MEETINGS	NUMBER	PERCENT
Meetings with parents (PTC, Area and Center Council)	507	26.2
Meetings with Program personnel (Unit, lead teacher and Social Services)	926	47.8
Staff Development	334	17.2
Other (e.g., Title XX Hearing, student evaluation)	170	8.8
Total For All Social Service Workers/Year	1937	100.0
Total Per Social Worker/Year	31	

III. Attainment of Internal Operating Objectives

Table IV presents information regarding the attainment of five objectives established by the Social Services component. These objectives were related to the internal operating functions of Social Services. The reported activities indicated that two of five objectives were attained and three were not attained by the target date set by the component.

TABLE IV

ATTAINMENT OF INTERNAL OPERATING OBJECTIVES[1]
1977-1978

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1) OBJECTIVE: To finalize by September 1, 1978 a comprehensive Outreach Plan developed through the cooperation of the socail service staff with the related component and administrative/supervisory staff to elicit greater service needs response from families and agencies.

FINDING: The Outreach Plan had not yet been developed by June 1978.

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2) OBJECTIVE: Beginning September 1, 1977 a program to encourage larger enrollments of schoolage children will be initiated by Social Services and Program Administration. (Success of this effort will be measured by a 5% increase of enrollment of schoolage children over the 76-77 figure.)

FINDING: Based on the information obtained from the Get Set monthly reports, the average schoolage enrollment in 1976-77 was 101. A 5% increase would have meant that an additional 5 children would be enrolled over the 1976-1977 enrollment figure of 101, that is, 106 children enrolled. The average schoolage enrollment in 1977-78 was 90 children.

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3) OBJECTIVE: During the ten month period beginning September 1977, six (6) workshops will be held for field social service staff who missed the 1976-1977 workshop on case recording techniques.

FINDING: Twenty-five social service workers attended six sessions, each three hours in length, of the case recording technique workshop. These sessions were held from October 19, 1977 through November 23, 1977.

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4) OBJECTIVE: Between September 1, 1977 and June 30, 1978 a series of six (6) workshops using audio-visual aids and techniques will be held in each social service area to improve staff skills in proper interviewing techniques.

FINDING: Seventy-four social service personnel and nine nurses attended six (6) sessions, each three hours in length, of the interviewing technique workshop. Fifty-nine persons (71%) completed an 8 questions evaluation form. Almost all found the sessions helpful, especially in dealing with cultural differences and non-verbal clients. Respondents stated that they were feeling more comfortable about undertaking an interview and better able to elicit more information from the client, thereby, becoming more sensitive to client's expressed and unexpressed needs.

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5) OBJECTIVE: In order to develop a more adequate information and referral system for social service workers and their clients, the social service administrative/supervisory personnel will take leadership in developing, by April 1, 1978, a loose-leaf, three-ring binder of referral resources to be used by individual social workers.

FINDINGS: The loose-lead folder had not been completed as of June 1, 1978.

IV. Social Service Workers Participation in Parent Involvement and Volunteer Service Activities

Social Service workers were also responsible for engaging in parent involvement and volunteer service activities. Table V presents the number and types of parent and volunteer activities involving the SSWs. On the average, each SSW was active in 8 parent or volunteer activities during the year. The primary areas of SSW's involvement were monthly parent meetings

TABLE V

SOCIAL WORKER'S PARTICIPATION IN
PARENT INVOLVEMENT AND VOLUNTEER SERVICES ACTIVITIES

TYPE OF ACTIVITIES	NUMBER	PERCENT
Monthly Parent Meetings	181	39.1
Engaging in Parent Projects	132	28.5
Planning Sessions for Parent Activities	108	23.3
Fund Raising	31	6.7
Recruitment of Parent or Volunteers	11	2.4
Total For All Social Service Workers/Year	463	100.0
Total Per Social Service Worker/Year	8	

(39%), parent projects (28%) and planning sessions for parent activities (23%).[1]

V. Summary and Conclusion

Cummulative data from 1977-78 show that GS's 62 SSWs initiated 58,919 contacts, and that these contacts were held primarily with parents or guardians of children enrolled in GS. The SSWs also participated in 1937 meetings (including 463 parent and volunteer activities). Due to the different methods of data collection and analyses, specific figures related to the purpose of the SSW's interaction with a family, program personnel or representative of community agency were not available. However, SSWs methods of contact were available and their modes of contacts paralled for both 1976-77 and 1977-78 program years.

The SSWs' participation in parent involvement and volunteer service activities were primarily held in the form of attending monthly parent meetings, attending parent planning sessions for parent projects and engaging in parent projects. Other meetings SSWs attended focused on issues or procedures regarding daily center operations. While the data indicated that a great deal of activity was generated in the social service area, references related to the component across programs could not be made because different methods were utilized to collect the data in the Get Set Day Care Program. In order to align the data collection procedures and analyses for the 1978-1979 program year, GS should expand its monthly reporting form to allow the reporting of pertinent information related to the areas of social services under examination by ECEU for Early Childhood Programs.

[1]Additional information may be obtained by referring to the Study of Parent Involvement in Early Childhood Programs, ORE Report No. 7912.

SOCIAL SERVICES IN PREKINDERGARTEN HEAD START

The overall purpose of the Head Start Program is to enhance the social competence of children from low-income families. Social Services is one of four major service provisions rendered to low-income families who are the primary recipients of this program. The functions undertaken by the social service workers are: 1) to enroll families into the program, 2) to serve as a liaison between the family, program and community, and 3) to involve parents in the program. The types and frequencies of activities provided by the three service workers are recorded on the Social Services Monthly (Quarterly) Report Form, and additional component information is submitted by the social services coordinator on a Social Services Component Report Form. These two forms constitute the major informational sources for this report. The information will be presented in the following sequence: I. Program Milieu, II. Social Service Objectives, III. Service Worker's Relationship with Program Personnel, and IV. Summary and Conclusion.

I. Program Milieu

During the program year 1977-78, 3376 inquiries or request for services were recorded by the service workers. From these requests and those re-registered from the prior year, approximately 1020 families with 1044 children were enrolled in the eighteen Head Start Centers. There were approximately 155 families with 162 children who left the program during the year which resulted in a monthly turnover rate of 1.8% of yearly turnover rate of 17.9%. There were 427 families on the waiting list in June 1978 and these families were recruited for the 1978-79 program year.

Forty percent of the families were one-parent households and the remaining 60% were two parent households.[1] While all families participate in the program so that a child may develop socially, intellectually, physically and emotionally,[2] the head of the household in 10% of the families were outside of the home for part of the day due to training, education or employment. Finally, families with a child diagnosed handicapped (i.e., identified as being a special needs child) constituted 12% of the total number of families in the program. There were 10 families (1%) with a handicapped and non-handicapped child enrolled.

II. Social Service Objectives

Five component objectives are listed in the Head Start Program Performance Standards and are presented verbatim from the manual. The service activities related to each objective will follow each of the statements.

a) Establish and maintain an outreach and recruitment process which systematically insures enrollment of eligible children.

The minimum enrollment in the program was 847 children (19 children X 47 classrooms). The average program enrollment from January to June 1978 was 876 children. With 98 teachers and aides, the adult-child ratio was 1:9. When families or children left the program, replacements were drawn from the families on the waiting list.

In addition to insuring general enrollment, there were program mandates directed to enrolling handicapped children. According to the 1975 amendment

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[1] The percentage figure differs from an earlier figure reported in the Prekindergarten Head Start Evaluation Year End Report, 1977-1978, Report No. 7916. The above figure is based on a revised data received from the Social Services Coordinator.

[2] Head Start Program Performance Standards, U.S. Department of Education, Health, and Welfare, July, 1975, pg. 4.

to the Economic Opportunity Act, at least 10% of the enrollment opportunities must be provided to handicapped children. For the 1977-78 program year, 11.7% of the total number of children enrolled were handicapped.[1] Therefore, the recruitment and outreach activities have ensured full enrollment, have resulted in a generous number of families on the waiting list, and have exceeded the national policy level of 10% handicapped enrollment.

b) Provide enrollment of eligible children regardless of race, sex, creed, color, national origin, or handicapped condition.

Data were not collected for specifically reporting creed, color or national origin of families or children. Enrollment information related to handicapped conditions were discussed above under Objective (a). Information related to race and sex is presented below. The information was obtained from the Early Childhood Evaluation Unit Pre-Kindergarten File. The data were inclusive of September through the end of February. (Data were not yet available for the period covering March through the end of June 1978.)

Table I shows that enrollment was equally available for both sexes. There were slightly more males who left the program during the first half of the year; however, enrollment at the end of February continued to maintain a balance.

TABLE I

HEAD START ENROLLMENT BASED ON SEX

Sex	ENROLLMENT STATUS					
	September 1977-October 1978		Number of Children Terminated from Program		February 1978	
	N	%	N	%	N	%
Male	519	50.4	84	54.5	435	49.7
Female	510	49.6	70	45.5	440	50.3
TOTAL	1029	100.0	154	100.0	875	100.0

[1]For further information, refer to Section B of the Early Childhood Programs: Mental Health Services 1977-1978, Report No. 7921, School District of Philadelphia, Early Childhood Evaluation Unit, December, 1978

Racial groupings for the entire program were classified into five categories and are presented in Table II. The data show that 82.7% of the children were Black, 10.5% were White and 6% were Spanish-Surnamed. Children classified as American Indian and Asian constituted only .8%.

TABLE II

RACIAL GROUPINGS IN HEAD START

Geographical Areas	RACIAL GROUPINGS									
	White		Black		Spanish Surnamed		American Indian		Asian	
	N	%	N	%	N	%	N	%	N	%
18 Head Start Centers	108	10.5	851	82.7	62	6.0	1	.1	7	.7
18 Elementary School Feeder Areas (ESFA)	1265	11.3	8872	79.3	1033	9.2	3	.0	19	.2

An updated percentage of each racial grouping of the communities in which the Head Start centers are located is unavailable; however, a related item is shown on Table II. The racial distribution of children enrolled in public Elementary School by Feeder Area (ESFA) is available for the 1977-1978 school year. The ESFA is shown to correspond to the racial distribution of children residing in the neighborhood in which these pre-school centers are located.

The racial composition of ESFA then, is similar to that of Head Start enrollment. Program participation has been available to all five racial groupings though enrollment is predominantly Black. This is a result of centers being geographically located in Black neighborhoods.

c) Achieve parent participation in the center and home program and related activities.

There were two seminars or workshops for parents during the year. After each presentation, parents completed a short questionnaire. The parents'

evaluations were summarized by the Early Childhood Evaluation Unit. The first seminar was held on March 29, 1978. Eight parents participated in a workshop entitled, "Job Presentation." These parents expressed satisfaction with the seminar leader. They also indicated that the topic was interesting and that it was an informative session. Parents stated they had become more aware of the acceptable and non-acceptable methods of applying for a job. The two suggestions given were to have more sessions and to have more parents attend these workshops.

The second seminar was held on May 21, 1978. Sixteen parents attended to obtain information on President Carter's Welfare Rights Reform Bill HR 9030. Again, parents' reactions were favorable. Parents expressed satisfaction with the speaker and with the content of the seminar. Parents stated that they learned about the meaning of HR 9030 and its potential effects upon their livelihood.

Additional information on parent participation in the program is available under the Parent Involvement Component Report. Information related to functions of parent groups, involvement with community groups, volunteer services and parent workshops are discussed in that report.

There is no "home program" affilated with Prekindergarten Head Start in Philadelphia.

d) Assist the family in its own efforts to improve the conditions and quality of family life.

In order to assess this objective, information was collected to ascertain 1) the need for social services from the service worker's point of view, 2) frequency of contacts with families and 3) purpose of contacts and methods of assisting the families. Information pertaining to need for services and

frequency of contacts with families are reported quarterly, whereas, the latter item is discussed by program year. In addition, 1976-1977 data for these areas are presented for comparative purposes.

Need for Social Services

Service workers identified the number of families in need and indicated the number of these families that were assisted each quarter. They also reported separately, the number of families assisted in each quarter who were identified in previous quarters. Table III shows the number of families identified as being in need of service by quarter for both the 76-77 and 77-78 program years. The common factor for both program years is that the highest percentage of service needs is in the first quarter (Q_1).

TABLE III

FAMILIES IDENTIFIED IN NEED OF SOCIAL SERVICES

Quarter	FAMILIES					
	1976-1977			1977-1978		
	Total Identified	Requiring Services		Total Identified	Requiring Services	
	N	N	%	N	N	%
Q_1 09/77-12/78	782	326	41.7	817	397	48.6
Q_2 01/78-03/78	812	264	32.5	828	146	17.6
Q_3 02/78-06/78	809	192	23.7	822	254	30.9

For the 77-78 program year, 78% (797) of the families were identified as being in need of social services and 71.8% (572) of these families received assistance from the service workers. The percentage increases to 73.4% upon adding to these 572 families, 13 other families identified during the 76-77 program year who continued to receive social services in 77-78.

A more detailed breakdown of families assisted during the year is shown in Table IV. Under the heading "new families identified," 69% of the families were assisted in Q_1 and Q_3 while 82% of the families were assisted in Q_2. Comparing these figures to the 76-77 program year, there was an increased effort of 10% over the prior year. It is not known what happened to the families that did not obtain services from the social workers.

Under the heading "new and prior identified families," there was a slight increase in service provisions in Q_1 of 80% in 77-78 from 78% in 76-77. However, in Q_2 a reverse situation occurred. There was a dramatic drop in service provisions of 56% in 77-78, down from 75% in 76-77. Data for Q_3 for the 77-78 year is incomplete and unavailable until January, 1979.

The data also show an emerging pattern of families whose service needs extend into the quarter following their initial identification for services. The number of families whose needs were unresolved in the quarter identified, have grown increasingly larger from 3 to 57 families in 76-77, to 13-77 in 77-78. As a result, the number of families who require follow-up services increased with each program quarter and has increased in number from the previous year.

Frequency of Contacts with Families

The frequency of contacts with each family was obtained to ascertain whether a few families continuously received more service attention than other families. Frequency of contacts were pre-categorized into less than three contacts, less than six contacts or more than six contacts with each family in each quarter. The frequency of contacts is shown on Table V.

TABLE IV

NUMBER OF FAMILIES IDENTIFIED IN NEED OF SERVICES BY QUARTER
AND NUMBER ASSISTED, SERVICE NEEDS RESOLVED AND SERVICE NEED CARRIED INTO SUBSEQUENT QUARTER

Quarter	NEW FAMILIES IDENTIFIED					NEW AND PRIOR FAMILIES SERVICED					
	Identified in Quarter	Assisted		Unassisted		Carry Over From Previous Quarter	Total Families Assisted	Need Resolved During Quarter		Carry Over into Next Quarter	
	N	N	%	N	%	N	N	N	%	N	%
Q_1 76-77	326	197	60.4	129	39.6	03	200	156	78.0	44	22.0
Q_1 77-78	397	276	69.5	121	30.5	13	289	232	80.3	57	19.7
Q_2 76-77	264	186	70.5	78	29.5	44	230	173	75.2	57	24.8
Q_2 77-78	146	120	82.2	26	17.8	57	177	100	56.5	77	43.5
Q_3 76-77	192	117	60.9	75	39.1	57	174	161	92.5	13	7.5
Q_3 77-78	254	176	69.3	78	30.7	77	252	Unavailable		Unavilable	

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TABLE V

NUMBER OF FAMILY CONTACTS
BY EACH PROGRAM QUARTER

Quarter		FREQUENCY OF CONTACTS						FAMILIES CONTACTED			
		1-3		4-6		6 +		Total In Quarter		Total Families	Per Worker
		N	%	N	%	N	%	N	%	N	N
Q_1	76-77	358	85.6	49	11.7	11	1.4	418	53.3	748	140
Q_1	77-78	487	84.0	73	12.6	20	3.4	580	70.1	817	193
Q_2	76-77	362	81.5	67	15.1	15	3.4	444	54.7	812	148
Q_2	77-78	475	96.7	16	3.3	0	0.0	491	59.3	822	164
Q_3	76-77	311	67.3	129	27.9	22	4.8	462	57.1	809	154
Q_3	77-78	330	75.7	76	17.4	30	6.9	436	53.4	828	145
Q_{AVG}	76-77	344		82		16		441			147
Q_{AVG}	77-78	430		55		17		502			167

For the 76-77 program year, there was a gradual increase in the number of families contacted in each succeeding quarter. The frequency of contacts for "less than three contacts" gradually declined, and correspondingly, the "four or more contacts per quarter" category increased. For the 76-77 program year, the number of families identified as being in need of services and the number assisted remained stable. However, for the 77-78 program year, the number of families identified and assisted increased from 53% to 70% for Q_1. They were similar to the 76-77 service levels for Q_2 and Q_3. The frequency of contacts in Q_1 in 77-78 was similar to the 76-77 service level, but varied for Q_2 and Q_3.

Purpose of Contacts and Methods of Assisting Families

Table VI shows the purpose of contacts with families and the methods of assisting the families. These contacts constitute 62% (3736) of all contacts conducted by the service workers during the year. It excludes service worker's contacts in the advocacy role, referrals, contacts with other agencies and staff conferences.

Service workers assisted families primarily to discuss admission and recruitment (35.2%) and child's attendance (34.4%). A secondary area of the contacts (16.1%) was to ensure flow of information between the program and family. The remaining contacts (14.3%) were to discuss family dysfunctioning, child's physical health and information sharing about community resources.

As with the 76-77 program year, service worker's modes of assistance in 77-78 were through the use of telephone only (41.0%) or through home visits (36.9%). Parent conferences were less frequent (22.1%).

In 76-77, the service worker's major focus was on child attendance, which was followed by (slightly less) emphasis on admission and recruitment. However, in 77-78, the focus reversed, though changes were minimal. The service worker's attention to the remaining items was similar to those in 76-77. Thus, the bulk of the service worker's attention continued to concentrate on child's attendance and recruitment/admission. The modes of assistance continued to be conducted through the use of telephone only or home visits. Overall, there was a striking similarity between the two years in service contacts and modes of contacts with families.

e) Make parents aware of community services and resources, and facilitate their use.

TABLE VI

COMPARISON DATA OF THE TYPES OF PARENT CONTACTS
CONDUCTED BY SERVICE WORKERS
TO ASSIST FAMILIES IN HEAD START[1]
1976-1978

Purpose of Contacts With Families	TYPES OF PARENT CONTACTS															
	Phone Contacts Only				Home Visits				Center Conferences				Total Contacts			
	1976-1977		1977-1978		1976-1977		1977-1978		1976-1977		1977-1978		1976-1977		1977-1978	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Child's Attendance	592	15.2	587	15.7	617	15.8	498	13.3	252	6.5	201	5.4	1461	37.4	1286	34.4
Child's Physical Health	54	1.4	43	1.2	102	2.6	49	1.3	16	.4	18	.5	172	4.4	110	2.9
Family Dsyfunctioning	37	.9	75	2.0	71	1.8	104	2.8	83	2.1	76	2.0	191	4.9	255	6.8
Home-School Information	298	7.6	297	7.9	178	4.6	139	3.7	136	3.5	164	4.4	612	15.7	600	16.1
Information About Community Resources	47	1.2	47	1.3	58	1.5	63	1.7	96	2.5	59	1.6	201	5.1	169	4.5
Admission/Recruitment	541	13.9	483	12.9	431	11.0	527	14.1	296	7.6	306	8.2	1268	32.5	1316	35.2
Total	1569	40.2	1532	41.0	1457	37.3	1380	36.9	879	22.5	824	22.1	3905	100.0	3736	100.0

[1]Source of Information for 1976-1977; Report on Early Childhood Program Social Services, 1976-1977, School District of Philadelphia, ORE Report No. 7888, pg. 30.

A-3.11

Table VII shows the number of contacts related to community agencies and resources. Of the total number of contacts conducted by the service workers, 7.9% (476) were related to conducting referrals and their role as a community liaison or advocate. Approximately one-half of these contacts were made for child attendance, one-fourth for family dysfunctioning and one-tenth for child's physical health.

TABLE VII

TYPE OF CONTACTS WITH COMMUNITY AGENCIES

Purpose of Contacts	ROLE OF SERVICE WORKER							
	Community Liaison		Advocacy Role		Referral Services		Total Contacts	
	N	%	N	%	N	%	N	%
Child's Attendance	1	1.5	199	57.3	0	0.0	200	42.0
Child's Physical Health	1	1.5	41	11.8	20	31.7	62	13.0
Family Dysfunctioning	13	19.7	95	27.4	16	25.4	124	26.1
Home-School Liaison	6	9.1	0	0.0	5	7.9	11	2.3
Information about Community Resources	17	25.8	12	3.5	17	27.0	46	9.7
Admission/Recruitment	28	42.4	0	0.0	5	7.9	33	6.9
Total	66	100.0	347	100.0	63	99.9	476	100.0

Table VI also indicates that only 5% of the total contacts with families were undertaken for the purpose of informing families about community resources. It appears therefore, that contacts with community agencies or contacts with families about community agencies are insignificant areas of service provision.

In conclusion, the social services workers were responsive to at least 4 of the 5 major program objectives listed. It appears that the primary focus was on admission/recruitment and child's attendance.

Service activities in relation to purpose and modes of assistance were similar in both the 76-77 and 77-78 program years.

III. Staff Relationships

Table VIII shows the purpose of service workers' contacts with program personnel. These contacts with staff constitute 30.2% (1825) of the total number of contacts undertaken by the service workers. Approximately one-half of all contacts were to discuss child's attendance (which may be a reflection of the teacher's concern about a child's absence from the program). One-fourth of the staff contacts were to discuss admission/recruitment (and possibly also to orient teachers and aides about an incoming child). Ten percent of the contacts were to discuss family dysfunctioning. The remaining 13.5% of the contacts were to discuss either the child's physical health, home-school program information, or community resources. Similar to service workers contacts with families, the major purpose of contacts with staff were to discuss admission/recruitment and child's attendance.

TABLE VIII

PURPOSE OF SERVICE WORKERS' CONTACTS WITH PROGRAM PERSONNEL

Purpose of Contacts	Number	Percent
Child's Attendance	959	52.5
Child's Physical Health	103	5.6
Family Dysfunctioning	191	10.5
Program Information	122	6.7
Community Resources	21	1.2
Admission/Recruitment	429	23.5
Total	1825	100.0

IV. Summary and Conclusions

Head Start provided services to both handicapped and non-handicapped children. Capacity enrollment was maintained and there was an ample number of families on the waiting list. Service provisions reflected the attainment of 4 of 5 major program objectives. Slightly less than two-thirds of the contacts were with families, slightly less than one-third were with program personnel, the remaining contacts were with community agencies. The primary purpose of contacts with parents and program staff were to discuss admission/recruitment and child's attendance.

Referrals and counseling services were minimal. There was little focus on mental health needs, family dysfunctioning or sharing of community resources. Service workers focused on the process of enrollment (recruitment/admissions) and maintaining program participation (child's attendance). There was little emphasis by service workers on involving parents in the program, or serving as a liaison between program, families and community agencies. This suggests that families may be stable or able to resolve their own needs. However, it may also indicate that these areas (operationally) are not within the realm of service provisions under Social Services and are implemented through other program components.

In closing, service workers have demonstrated greater responsiveness to families this year as compared to the previous year. At this time, however, there are three areas of service provisions that may require some attention. First, depending on the reporting period, 20-30% of the families identified as being in need of services (excluding program participation) did not obtain services. It is not known whether or not the families

received services from other agencies. Secondly, there is an increasingly large number of families whose service needs extend beyond a quarter. This may or may not be a result of the increasing number of demands on each worker (e.g., increasingly complex case to resolve). And third, little emphasis was placed on sharing community resources with parents. This may or may not have been de-emphasized by service workers in order to ensure internal program achievement (e.g., recruiting handicapped children, full enrollment) and to assure that children obtain maximum exposure to the program (e.g., child's attendance, physical health care).

SOCIAL SERVICES IN FOLLOW THROUGH

Social Services in the 14 original Follow Through (FT) schools were provided by 11 Parent Involvement Coordinators (PICs). Due to a delay in funding, services were unavailable to program participants until mid-November, 1978. Consequently, information pertaining to social services encompassed a 7½-month period for the 1977-1978 school year.

The PICs recorded their activities on the Follow Through School Community Coordinator Monthly Report Form. Data were collected from nine PICs spanning 7-8 months of activities in 12 schools. The PIC assigned to the thirteenth school was on sick leave from April, 1978, which resulted in five months of social service provisions for that school. Data were not available from the PIC at the fourteenth school. As a result, social service data constituted 92% of the total number of monthly available recorded services.

Social Services will be discussed in relation to three areas. First, activities will be related to the two FT social service objectives. Second, a brief description of the methods and areas of assistance to families who were identified as being in need of services will be presented. Third, a brief description of the types and number of meetings PICs attended during the year.

I. The Follow Through Social Service Objectives

The Follow Through social service objectives mandated by Title I were:

A. The social services aide at each school will visit at least 85% of the families who have children in FT, and

B. The social services aide will consistently engage in helping at least 50% of those families identified as in need of services.

In response to objective A, the PICs were requested to answer the question "How many Follow Through families received their initial home visit this month." Only five PICs provided data that was relevant to the question in the eight month period. The five PICs from six schools reported conducting 635 initial home visits. The remaining PICs did not provide the information because there were miscommunications regarding the recording form. Based on the available data, it was not possible to determine if the objective was achieved.

Ten PICs reported conducting 3476 home visits during the year. However, they did not specify whether initial or on-going home visits. Table I shows the number of home visits conducted at each school by PIC designate. Schools were identified by a letter of the alphabet (A-N). In addition, the average number of children enrolled and the estimated number of families participating in each FT school are listed. Four PICs assigned to six FT schools conducted 60% of all home visits, while 6 PICs conducted 40% of the home visits. Data were not submitted from the PIC at fourteenth school.

In relation to objective B, the PICs identified 766 families who required social services during the year. Of these families, 544 (71%) received services within the month the service need was identified. Based on the 50% objective performance level established for objective B, this objective was attained during the year.

II. Purpose and Methods of Assisting Families Requiring Social Services

Each PIC was requested to identify the purpose of contacting a child or family and report the method of responding to the service need. Table II presents the interaction between the FT participants and the PICs.

TABLE I

HOME VISITS CONDUCTED BY PARENT
INVOLVEMENT COORDINATORS AT FOLLOW THROUGH SCHOOLS

Follow Through Schools(s) By PIC Designate	NUMBER OF PARTICIPANTS		HOME VISITS CONDUCTED
	Avg. No. of Children[1]	Estimated No. of Families[2]	Number
Schools A/B	325	276*	487
Schools C/D	210	174	341
School E	172	143	200
Schools F/G	229	190	596
School H	349	225*	242
School I	264	267*	505
School J	255	140	478
School K	149	124	277
School L	251	218*	0
School M	245	203	202
School N	277	230	148
Total	2726	2190	3476
Avg. Per. PIC (N=10)			348
Avg. Per Month			44

[1]Source of Information. Monthly Report, Elementary - SDP, January - March 1978.

[2]Estimated number of families is based on 83% of the number of children enrolled in each participating school.

* Asterisk indicates reported number of families in the FT program by the PIC worker.

TABLE II

AREAS IN WHICH PARENTS OF CHILDREN IN 12
FOLLOW THROUGH SCHOOLS WERE ASSISTED
BY THE PARENT INVOLVEMENT COORDINATOR[1]

Purpose of Contacts	METHODS OF CONTACTS						
	Phone Contacts Only	Home Visits[2]	Parent Conferences	Referrals	Acted On Child/Adult's Behalf	Total Contacts	
	N	N	N	N	N	N	%
Child's Attendance	298	849	123	61	79	1410	29.2
Child's Physical Health	259	509	82	125	99	1074	22.2
Child's Mental Health	36	93	45	17	25	216	4.5
Family Dsyfunctioning	83	244	53	27	35	442	9.2
Sharing Program Information Including Com. Resources	509	936	129	62	49	1685	34.9
Total	1185	2631	432	292	287	4827	100.0
Percent	24.5	54.5	9.0	6.0	6.0	100.0	
Per PIC (N=9)	132	292	48	32	32	536	
PIC Per Month	17	37	6	4	4	67	

[1]Data were not submitted by two PICs, therefore, N=9 instead of N=11.

[2]A total of 3476 home visits were made, however only 2631 (72%) were further specified in terms of purpose and method of contacts.

On the average, each PIC made 536 contacts during the year or 67 contacts per month with or for the program participants. Contacts were conducted in five areas. Overall, 35% of the contacts were undertaken to share program information which included sharing information about community resources. This was followed by contacts for child's attendance (29%); child's physical health (22%); and child's mental health and family dysfunctioning (combined 14%). The modes of contacts undertaken by the PICs were home visits (55%), followed by the use of the telephone only (25%), parent conferences (9%), referrals (6%), and acting on the child's or adults' behalf (6%).

III. Types of Meetings Attended by PICs

Table III shows the number and types of meetings with parents, the number of contacts with community agencies and interest groups, and number of contacts with program personnel. The ten PICs conducted 2448 contacts with program personnel, attended 226 parent meetings, and undertook 252 contacts with community agencies or interest groups. On the average, each PIC made 31 contacts with program personnel. Each PIC attended monthly a Parent Advisory Committee meeting (PAC), a parent education meeting, and less frequent, a city-wide Task Force meeting. There were three contacts monthly with community agencies but less frequent contacts with interest groups.

TABLE III

MEETINGS INVOLVING PARENT INVOLVEMENT COORDINATORS
WITH PARENTS, COMMUNITY GROUPS, VOLUNTEERS
AND PROGRAM PERSONNEL

Follow Through Schools By PIC Designate	No. of Reports Submitted	Parent Meetings			Community Groups		Program Personne
		P.A.C.	Parent Education	City-Wide Task Force	Agencies	Interest Groups	
A - B	7	14	2	5	8	5	159
C - D	14	16	0	14	22	15	633
E	8	5	2	3	11	4	144
F - G	14	18	23	9	20	3	252
H	8	11	10	5	78	15	338
I	7	7	27	4	26	6	111
J	7	1	3	6	2	0	149
K	8	6	0	6	3	0	243
L	0	0	0	0	0	0	0
M	8	5	5	5	4	0	246
N	5	5	6	3	21	9	173
Total	86	88	78	60	195	57	2448
Per PIC (N=10)	-	9	8	6	20	6	245
Per Month (N= 8)	-	1	1	<1	3	<1	31

IV. Summary

In review, ten PICs conducted 3476 home visits for a monthly average of 44 home visits. There were 766 families identified as being in need of services, and 71% of these families were assisted within the month that the service need was identified. Services to FT participants were primarily through home visits or use of the telephone to share program information, including information on community resources, and to discuss a child's attendance and/or child's physical health care needs. Data which would address objective A were not obtained from all PICs. Therefore, it was not possible to determine an attainment level for this objective. However, the 50% performance level of service responsiveness stated as objective B was attained. Finally, the PICs attended parent meetings and undertook a liaison role with community agencies and interest groups.

In closing, the data collection instrument has been modified for the 1978-79 school year so that information pertaining to objective A can be obtained. It specifically seeks to identify the number of families and the number of families receiving an initial home visit. Also, efforts will be made to ensure that data are obtained from all PICs in the 14 FT schools.

SOCIAL SERVICES IN PARENT COOPERATIVE NURSERIES

The Parent Cooperative Nursery Program (PCN) operates in 21 sites and serves 460 children. Each child in the program receives a 3-hour nursery school experience daily. The program is presently unable to provide services to children with special needs (e.g., the physically handicapped). A special requirement of the program is that a parent or some member of the family assist one day a week in the nursery. Each center has a trained nursery teacher who assumes the responsibility of meeting the health and social needs of the children in addition to providing on-site instructional teaching activities for the parents. This report is concerned with the teacher's responsibility for providing social services to the children and families enrolled in PCN.

A program objective for the year was to ascertain whether or not there is a need for special social services personnel. The existence of the need was made contingent on the following two criteria established in consultation with the program administrator (1) 10-15% of the families would be in need, and (2) provision of service would be a continuous responsibility. As a preliminary means of responding to this question, PCN teachers were requested to complete the same social services form which is used by social service workers in other Early Childhood Programs (ECP) in the School District of Philadelphia. The form is designed for reporting information monthly or quarterly and was completed quarterly by the PCN teachers.

The three major areas of concern regarding PCN's needs were: (1) the number of new families needing assistance in each quarter, along with the number of new families and families identified in a prior quarter who were assisted in

each quarter, (2) the purpose of service contacts and the methods teachers undertook to resolve the area of needed attention, and (3) the number of families and frequency of parent contacts by the teachers in each quarter. The findings are presented below in the following sequence: (1) General program context for social services, (2) Specific nature of the social activities provided, including frequency of family contacts by the teachers, (3) Program objectives and (4) Summary and Conclusion.

I. General Program Context for Social Services

In September, 1977, 454 children from 431 families were enrolled in the program. By the end of June, 1978 an additional 63 children had enrolled whereas 168 children from 150 families left the program. Therefore for the 1977-1978 school year, a total of 517 children from 494 families participated in the PCN program. Approximately 95% of the children resided in two-parent homes.

A total of 117 families or 21% of the families exposed to the PCN program were identified by the teachers during the year as requiring social services. A more detailed flow of service needs is shown below in Table 1.

TABLE 1

FLOW OF SERVICE IDENTIFICATION
AND ASSISTANCE PROVIDED TO FAMILIES

N=117

Reporting Period	Families Identified In Prior Quarter *	New Families/ Number Served	Total Families/ Number Served	Total Families/ Service Completion
Quarter 1 (09/77-12/77)	10*	75/64	85/74	85/53
Quarter 2 (01/78-03/78)	32	23/17	55/49	55/27
Quarter 3 (04/78-06/78)	28	9/9	37/37	Unknown

* Previous, i.e., 1976-1977, school year.

As can be seen in the table, a total of 107 new families and 10 families identified from the prior year were assessed by the teachers as being in need of social services. The percentage of families identified and provided services in each quarter (column 3) are as follows: As indicated, teachers were able to serve in progressively better fashion all families identified in need of services in each succeeding quarter. Also, by the end of Quarter 2, 80 out of 108 families (74%) did not need further attention by the teachers.

The length of time teachers provided services to families is shown in Table 2. Service needs were resolved for two-thirds of the families within the same quarter in which the need for social services was identified, while 24% required attention for an additional 3 or more months. The remaining 8% were new families who were identified in the last quarter and it is unknown whether or not service needs will extend into the 1978-1979 school year.

TABLE 2

LENGTH OF SERVICE NEEDS

N=117

Number of Families		Length of Service Needs
80	68%	Resolved Within the Quarter Identified
21	18%	Required 6 or more months
7	6%	Required 3 to 6 months
9	8%	Required 1 to 3 months (identified in the last quarter of school year)

II. Specific Nature of the Social Service Activities Provided

Teachers were asked to identify and indicate how they responded to areas of need for the families. Table 3 shows the number of contacts during the year in 21 classes for Quarter 1, and 24 classes for Quarters 2 and 3. (Three additional classes were opened in Quarter 2). The teachers' interactions were divided into program and family focused needs. Teachers' activities show that they contacted families primarily to communicate program information, followed by the need to address the child's physical health, and then by program recruitment, program admission, providing community information to the family, family problems, child's attendance and child's mental health needs. The teachers' primary method of resolving areas of need was the use of parent conferences at the center, followed by telephone contacts, staff meetings, undertaking an advocacy role, conducting referrals and finally, home visits.

A closer view of the teachers' activities shows that the purpose of the contacts was program focused rather than family focused. Ten percent of the teachers' contacts were undertaken for the purpose of admission and recruitment and 65% of the teachers' contacts were made to share program information or information about the child's progress in PCN. Therefore, in three out of four cases, contacts with the families were for sharing information about the child's progress or PCN's program events and admission and recruitment purposes. Only one in four contacts were family focused. An interesting pattern found under family focused needs is that family dysfunctioning, mental health problems and child attendance problems were minimal and that the major focus is on a child's physical health. (Table 3).

TABLE 3

Areas of Needs & Methods of Providing Assistance

	Purpose of Contacts	Methods of Assistance					Total Contacts	
		Phone Only	Home Visit	Parent Conference Including Counseling	Advocacy Role & Referrals	Staff Conferences		
		N	N	N	N	N	N	%
Family Focused	Child Attendance	560	14	928	37	189	1728	3.3
	Physical Health	707	17	5527	251	123	6625	12.8
	Mental Health	50	11	200	105	126	492	.9
	Family Problems	253	21	1364	79	161	1878	3.6
	Community Resources	468	8	969	198	258	1901	3.7
	(Sub-Total)	(2038)	(71)	(8988)	(670)	(857)	(12624)	(24.4)
Program Focused	Home School Liaison	3713	141	28599	359	894	33706	65.1
	Admissions	750	56	816	112	285	2019	3.9
	Recruitment	1394	142	1201	343	383	3463	6.7
	(Sub-Total)	(5857)	(339)	(30616)	(814)	(1562)	(39188)	(75.6)
	TOTAL	7895	410	39604	1484	2419	51812	
		15.2%	0.8%	76.4%	2.9%	4.7%	100.0%	

Teachers employed parent conferences at the center and use of the telephone as the primary mode of responding to both program and family focused needs. Less than 3% of the teachers' assistance is through an advocacy role and conducting referrals or home visits. This seems to indicate that the families are stable and if assistance is needed, parents initiate their own contacts with community agencies after consulting with the teachers.

There appeared to be some confusion in obtaining information on the number of teacher-family contacts as some teachers responded by providing total number of families enrolled in each quarter while other teachers responded by indicating the number of families enrolled at the end of each quarter. Nevertheless, whether or not the base figure is the number of families enrolled at the end of each quarter or during the quarter, generally, teachers have contacted each family more than 6 times in each quarter. Table 4 shows the frequency of teachers' contacts with the PCN families. Note that the frequency of contacts gradually declined in each successive quarter, which may have been the result of reduced recruitment activities or families leaving the program as the school year ended.

TABLE 4

NUMBER OF TEACHER CONTACTS WITH FAMILIES

Reporting Period	Number of Contacts with Families						Number of Families	
	1 - 3		4 - 6		More than 6			
	N	%	N	%	N	%	N	%
Quarter 1	11	2.8	12	3.1	366	94.1	389	100
Quarter 2	28	6.8	8	2.0	373	91.2	409	100
Quarter 3	30	7.8	13	3.4	343	88.8	386	100

III. Discussion of the Program Objective

The program objective was to ascertain whether or not there is a need for a social services worker in the program. The criteria for accepting the existence of a need were established in consultation with the program administrator and included: (1) at least 10-15% of the total number of families enrolled each quarter would require social services, and (2) that service needs identified would demand continuous attention by the teachers. From the teachers' assessment of family needs, 21% of the total number of families were identified as being in need of services; however, only 6% required services beyond the quarter identified. This suggests that there is an absence of persistent problem areas, and hence, no need for a social service worker. Also, the families that were identified did not appear to be the appropriate group to refer to a service worker. It may have been more correct to refer those families to a health care worker because the family problem area that was identified was in the health care area rather than social services.

Eighty-seven to one hundred percent of the new families identified in need of services obtained services from the teachers during each quarter. By the end of April 1978, 74% of the families did not require services. Both of the findings indicate that the teachers have been responsive to the families' needs. Also, it seems that the existing referral procedures and teachers' availability for conferences provide families with sufficient information and guidance to act upon their problem situations. Finally, because teachers' interactions were primarily for for sharing program information, this pattern is consistent with the role of a teacher as it ensures

that parents are informed about their child's progress in the program.

The characteristic PCN program requirement of incorporating weekly parent input provides teachers with a built-in mechanism of addressing the child's health and social needs. Teachers in PCN do, however, undertake activities which are assigned to service workers in other ECP. Their program activities of recruitment, admission and keeping parents updated regarding childrens' progress, and family focused activities of physical health, attendance and community information are handled through parent conferences at the center or through use of the telephone. These activities indicate that teachers provide services beyond their 3-hours of classroom activities.

IV. Summary and Conclusion

Although a program objective was to ascertain a need for a social service worker, the data suggest that this type of personnel may not be of significant importance in attaining the overall program goals. The evidence that health care problems, and program-expediting activities rather than family dysfunctioning per se, were identified as the major social services functions undertaken by the teachers, indicates that special social services personnel are not apparently called for though a specific health care worker may be desirable, if only to conduct referrals, follow-up services and record-keeping. In addition, to assist the teachers, workshops or training sessions could possibly incorporate information on health care. To conclude, this preliminary study does not support the need for a special social services worker, though perhaps a health care worker would be in order. Perhaps a full-fledged needs

assessment survey to determine a need for a service worker could be undertaken over the next 2-3 years if this is considered essential by the program administrator. Pending this decision, the program will continue to be evaluated as before, i.e., as functioning without a specific social service component.

Social Services Component Information

_____ to _____

* 1. Number of Inquiries for Services ____

* 2. Number of Request/Application for Services ____

* 3. Number on Waiting List ____

4. Number of Families Admitted for Services (during the period) ____

   Number of Families Terminated from Services (during the period) ____

5. Number of Families and Children Currently Being Serviced in Program: Fam.___ Chldrn___

   a) Purpose of Service

      ____ Number parent oriented

      ____ Number child oriented

   b) Family Status

      ____ Number of one parent families

      ____ Number of two parent families

   c) Service Utilization by Families

      ____ Number using only regular service

      ____ Number using only special needs service

      ____ Number using both regular and special needs service

* Not applicable for Follow Through, Expansion and Project Bridge.

SOCIAL SERVICES COMPONENT (MONTHLY) QUARTERLY REPORT 1/24/77

Program_____ Site_____ Social Service Worker_____ Period Covered_____ Date_____

1. How many families did you initially identify as needing help of a social service nature this (month) quarter? (e.g., help in using community agencies; help with family problems, etc.) Do not include families whom you have previously identified as needing help._____

2. How many of these families (included above) were given help this (month) quarter?_____

3. Please indicate the types of help given in the chart below: (include all families.)

	Ways In Which Help Was Given							
Areas In Which Help Was Given	No. of Parent Contacts by Phone Only	No. of Home Visits	No. of Parent Conferences at Center	No. of Contacts with Other Agencies	No. of Persons Referred	No. of Cases Where You Acted on the Child/ Adult's Behalf	No. of Conferences with Staff	No. of Counseling Sessions with Families or Individuals
Child Attendance Problems								
Child's Physical Health								
Child's Mental Health								
Family Problems								
Program Info. Home-Schl. Liaison								
Info. About Community Agencies								
Admissions								
Recruitment								

4. How many families received their initial home visit this (month) quarter?_____

5. What is the total number of families with children in your center?_____

6. How many families were contacted 1-3 times during this (month) quarter?_____

7. How many families were contacted 4-6 times during this (month) quarter?_____

8. How many families were contacted more than 6 times during this (month) quarter?_____

9. How many families did you contact this (month) quarter to follow up on a problem that you dealt with in a previous period?_____

Comments on Back

yes_____ no_____

Follow Through

DRAFT

SCHOOL COMMUNITY COORDINATOR
MONTHLY REPORT

Name _____ School _____ Date _____

P.A.C. Meetings Attended

Date _____
Date _____
Date _____
Date _____

Parent Education Meetings (Attach Agenda)

Date _____ Topic _____
Date _____ Topic _____
Date _____ Topic _____
Date _____ Topic _____

City-Wide Task Force Meetings Attended

Date _____
Date _____
Date _____
Date _____

Home Visits

Week Ending	Number of Visits

Community Agencies

Date	Agency	Contact

Community Interest Groups

Date	Interest Group	Contact

Staff Contacts

Week Ending	Number of Contacts

Volunteers (attach xeroxed registers)

Registered	Working

Other Contacts (specify)

Date	Name

* Please turn over

School _____ 1/24/77

Month _____

FOLLOW THROUGH

SCHOOL COMMUNITY COORDINATOR (continued)

1. How many Follow Through families did you initially identify as needing help of a social service nature this month? (e.g., help in using community agencies; help with family problems, etc.) Do not include families who you have previously identified as needing help. _____

2. How many of these Follow Through families (included above) were given help this month? _____

3. Please indicate the types of help given in the chart below: (Include all Follow Through families.)

	Ways In Which Help Was Given							
Areas In Which Help Was Given	No. of Parent Contacts by Phone Only	No. of Home Visits	No. of Parent Conferences at Center	No. of Contacts with Other Agencies	No. of Persons Referred	No. of Cases Where You Acted on the Child/ Adult's Behalf	No. of Conferences with Staff	No. of Counseling Sessions with Families or Individuals
Child Attendance Problems								
Child's Physical Health								
Child's Mental Health								
Family Problems								
Program Info. Home-Schl. Liaison								
Info. About Community Agencies								
Admissions								
Recruitment								

4. How many Follow Through families received their initial home visit this month? _____

5. What is the total number of Follow Through families at your school? _____

6. How many families were contacted 1-3 times? _____

7. How many families were contacted 4-6 times? _____

8. How many families were contacted more than 6 times? _____

9. How many families did you work with this month to follow up on a previous problem? _____

Include All Follow Through Families

Social Services Component Report Form
General Instructions, Definitions and Examples

This form is being used to collect information about the social service components of several Early Childhood Programs. Each form consists of identifying information (top line), eight specific questions and a chart. The information compiled from these reports will show the nature and extent of the relationships between members of the component and the program's parents and staff. Since the programs are different, it is likely that some items may not apply as well to one social service worker as they do to another.

The chart (question 3) looks at two dimensions of social service. The headings on the left labeled "Areas in Which Help Was Given" are the problems a social service worker may be called on to deal with. Across the top, "Ways in Which Help Was Given" are listed some of the ways a problem may be handled.

In other words, the rows are labeled with situations that call for social service help, and the columns are some ways of providing that help. Each contact that a social service worker makes can be categorized on the chart in terms of the problem or job requirement and the method of solving that problem or fulfillment of the requirement.

Instructions for Using the Social Service Information Report Form

Question 1: Indicate here the number of families who you identified, for the first time this month, as needing your help. These families may have been referred to you by someone else, or you may have realized their need for help in the course of your regular work.

Question 2: Record only those families given help who you included in question number 1. (Those identified for the first time this month.)

Question 3: Include on the chart all families regardless of whether or not they were initially identified this month.

Child Attendance Problems

Use this category to record contacts you made about any attendance-related situation which would prevent the child from deriving the maximum benefits from the program such as

1. chronic absence
2. lateness
3. chronic need for early dismissal or early pickup

Child's Physical Health

This would include illness, injury, excessive sleepiness, etc.

Child's Mental Health

Use this category only if the child has been diagnosed by a medical or mental health professional, e.g., a school psychologist has determined that a child has a learning disability, and you must visit his home to provide the parents with special materials.

Family Problems

Use this category if the reason for your contact is to provide aid to a family regarding a problem concerning relationships among family members. This contact may lead to you giving the family information about community agencies (a separate category), but if the reason for your contact was a domestic situation, record the contact in this section.

Program Information/Home-School Liaison

Record here all contacts which have as their main emphasis informing families about aspects of the program or situations where you act as the link between home and school. Collecting trip slips or alerting parents to meetings would be recorded here.

Information About Community Agencies

Include here contacts you have which are related to telling families how they can go about getting adequate housing, financial support, food stamps, etc.

Admissions

Record here contacts which relate to the processing of children to place them on the center or school's roll.

Recruitment

This category covers contacts made for the purpose of enrolling new children in the program. This comes before the admissions process.

Ways in Which Help Was Given

No. Of Parent Contacts by Phone Only

Record in this column the total number of phone contacts to parents. If you have made more than one call to a parent, record them all. EXCEPTION: If there was a visit and/or a center conference in addition to the phone call, do not record the call. Example: If you made a single home visit preceeded by a phone call, record only the visit. If you have made one home visit and three phone calls record one home visit and two phone calls. This exception also applies to "Parent Conferences at Center."

No. of Home Visits

Record here the number of home visits you have made during this (month) quarter. Record all visits, even if you have made more than one visit to a single family.

No. of Parent Conferences at Center

These may be either conferences that you have arranged or situations where a parent stopped by without prior notice.

No. of Contacts With Other Agencies

Record all of the contacts you make with outside agencies to help the parents associated with your school or center. These contacts may be by phone or in person and might include agencies such as the County Board of Assistance, a Health Maintenance Organization, etc. Do not include referrals here.

No. of Persons Referred

This should include those parents or children who you referred to someone else for help.

No. of Cases Where you Acted on the Child/Adult's Behalf

This category is intended to record those situations where a parent or child has been unsuccessful securing a service and you have interceded and spoken for them.

No. of Conferences with Staff

This should include both formal and informal conferences with school/center personnel or supervisors.

No. of Counseling Sessions with Families or Individuals

This category should be restricted to relatively in depth interaction centered on issues of personal adjustment. Counseling would most likely extend over several sessions and involve written records and planning by the social service worker.